

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

725206

FILING DATE

4-19-85

APPLICANT(S)

Jeffery et al

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7	1					
8		1				
9		1				
10		1				
11		1				
12		1				
13	1					
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21		1				
22		1				
23		1				
24		1				
25	cancel					
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41	cancel					
42						
43		1				
44		1				
45		1				
46		1				
47		1				
48		1				
49		1				
50	cancel					
TOTAL IND.	4					
TOTAL DEP.	29					
TOTAL CLAIMS	33					

	IND.		DEP.		IND.		DEP.		IND.		DEP.	
51	cancel											
52			1									
53												
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TOTAL DEP.												
TOTAL CLAIMS												